

EQUINE MANAGEMENT REPORT 2005 July 1, 2005



National Animal Health Monitoring System

2150 Centre Ave., Bldg. B Fort Collins, Co 80526-8117

Form Approved O.M.B. Number 0579-0079 Approval Expires 12/31/06

Please make corrections to name, address and Zip Code, if necessary.

INTRODUCTION

(Rephrase in your own words.)

The information gathered during this study will help us identify health-management factors used on farms to control equine diseases. It will also allow us to evaluate changes in equine health management that relate to control of infectious diseases and the economic consequences of selected equine diseases. (The background information including equine inventory allows us to evaluate health—management factors at the national level.)

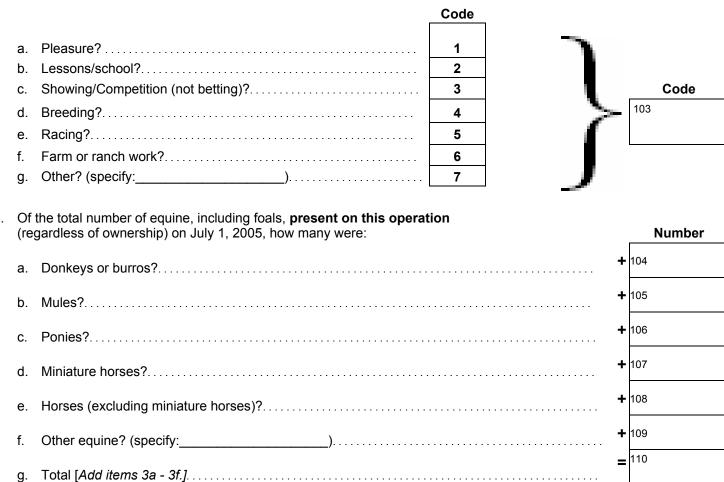
[Explain the program and show the respondent the Equine 05 brochure and the Producer Information Packet.]

Ве	gin	101		
1.	Wh	nat do you consider to be the primary function of this operation?		
			Code	
	a.	Equine boarding stable/training	1	1
	b.	Riding stable (give lessons, rent equine, etc.)	2	
	C.	Race track	3	Code
	d.	Equine breeding farm	4	102
	e.	Guest ranch	5	(
	f.	Farm or ranch	6	
	g.	Residence with equine for personal use (show, pleasure, etc.).	7	
	h.	Other (specify:)	8	,

Now I have some questions about all of the equine, regardless of ownership, that were on this operation July 1, 2005.

Section A. Equine Inventory

2.	What do you consider to be the primary use of the equine currently on this operation (regardless of ownership) on
	July 1, 2005:



The next several questions relate to equine that are considered "residents" of this operation. A resident equine is one that has spent, or is expected to spend, more time at this operation than at any other operation throughout the year. In other words, this operation may be considered the animal's "home base." Resident equine will be referred to throughout this Questionnaire.

4. How many of the following equine, including foals, were considered residents of this operation as of July 1, 2005 (whether or not they were present on this operation that day):

a.	Donkeys or burros?	+	111
b.	Mules?	+	112
C.	Ponies?	+	113
d.	Miniature horses?	+	114
e.	Horses (excluding miniature horses) ?	+	115
f.	Other resident equine? (specify:)	+	116
g.	Total [<i>Add items 4a - 4f</i>] ?	=	117

Number

If item 4g = 0, skip to item 62

5.	Ho	w many resident equine are:		Number
	a.	Birth to 30 days of age?	+	118
	b.	Greater than 30 days but less than 6 months of age?		119
	C.	6 months to less than 5 years of age?	+	120
	d.	5 years to less than 20 years of age?	+	121
	e.	20 years to less than 30 years of age?	+	122
	f.	30 years of age or older?		123
	g.	Total number of equine [Add items 5a - 5f; should equal item 4g.]	=	124
6.		w many of the resident equine (item 4g) were uniquely identified with the fol uine has a different ID; no two equine have the same ID):	lowing identification	methods (each
	a.	Hot-iron brand?		125
	b.	Freeze brand?		126
	C.	Microchip?		127
	d.	Tattoo?		128
	e.	Permanent brand inspection? (card with markings indicated or sketch)		129
	f.	Registration papers?	_	130
	g.	Coggins test papers? (laboratory test results)		131
	h.	Halters or collars with name or number?		132
	i.	Passport?		133
	j.	Other unique ID? (specify:)	_	134
	k.	No unique ID?		135
	I.	Total [<i>Add items 6a – 6k; should be ≥ item 4g.</i>]		136
7.	dev	fore today, how familiar were you with the National Animal Identification S evelop a unique identification number for livestock premises and livestock in ohir life spans? (Select one only.)	rder to record their n	
			Code	
	a.	Had not heard of it before	1	Code
	b.	Recognized the name, not much else	2	137
	C.	Knew some basics.	3	
	d.	Knowledgeable	4	
8.	Wh	nich of the following is the primary method of recording equine health information	ation on this operatio	on? (Select one
			Code	
	a.	Computerized health records maintained on the operation.	1	
	b.	Hand written in designated log (e.g., health card, logbook)	3	Code
	c. d.	Hand-written notes (e.g., calendar, checkbook) Operation records maintained by veterinarian	4	
	u. e	No written or computerized records	5	

Section B. Testing

	We	re any of the following tests performed for resident equine during the	e past 12	months:						
				Yes = 1	No = 3		Code			
i	a.	Fecal test for parasites?				139				
ı	b.	Feed or pasture analysis?				140				
(c.	Water analysis?				141				
		ich of the following best describes how familiar you were with equin disease for which we do the Coggins test.)	e infectiou	`	IA) befor	e toda	ay? (This is			
	_	Had not heard of it before		Code 1			Code			
	a. b.	Recognized the name, not much else			L _	142	Code			
	D. С.	Knew some basics.								
	d.	Knowledgeable								
	u.	Talowicagoable								
lf ite	m	10 = 1, skip to item 15.								
11.	Reg	garding Coggins or other tests for EIA, how many resident equine w	ere tested	l for EIA duri	ng the	N	Number			
ı	pre	vious 12 months?								
lf ito										
	ım.	11 = 0 skin to item 15								
) 	11 = 0, skip to item 15.					.			
	em	11 = 0, skip to item 15.					Dollars			
		11 = 0, skip to item 15. at was the average cost per EIA test (including call fee or cost of tra	nsportatio	on)?		144 \$	Dollars			
12. \ 13.	Wh		•	•		144	Dollars			
12. \ 13.	Wh	at was the average cost per EIA test (including call fee or cost of tra	•	12 Yes = 1	No = 3	144 \$	Dollars Code			
12. \ 13. 	Wh Did mo	at was the average cost per EIA test (including call fee or cost of tra resident equine have a Coggins test or other test for EIA during the nths for any of the following reasons? (Check all that apply.)	Reason Code	12		144				
12. \ 13. 	Wh	at was the average cost per EIA test (including call fee or cost of tra	previous Reason	12 Yes = 1	No = 3	144 \$				
12. \ 13. 	Wh Did mo	at was the average cost per EIA test (including call fee or cost of tra resident equine have a Coggins test or other test for EIA during the nths for any of the following reasons? (Check all that apply.)	Reason Code	12 Yes = 1	No = 3	144 \$ 145 146				
12. \ 13. 1	Wh Did mo a.	at was the average cost per EIA test (including call fee or cost of trad resident equine have a Coggins test or other test for EIA during the nths for any of the following reasons? (Check all that apply.) Change of ownership within State	Reason Code	12 Yes = 1	No = 3	144 \$				
12. \ 13. 1	Wh Did mo	at was the average cost per EIA test (including call fee or cost of trates resident equine have a Coggins test or other test for EIA during the nths for any of the following reasons? (Check all that apply.) Change of ownership within State	Reason Code	Yes = 1	No = 3	144 \$ 145 146				
12. \\ 13.	Wh Did mo a.	at was the average cost per EIA test (including call fee or cost of trad resident equine have a Coggins test or other test for EIA during the nths for any of the following reasons? (Check all that apply.) Change of ownership within State	Reason Code	Yes = 1	No = 3	144 \$ 145 146				
12. \\ 13.	Wh Did mo a. b. c.	at was the average cost per EIA test (including call fee or cost of trad resident equine have a Coggins test or other test for EIA during the nths for any of the following reasons? (Check all that apply.) Change of ownership within State. Show or event requirement within State. Facility (e.g., boarding, breeding) requirement within State. Interstate movement (between two or more States).	Reason Code 1 2 3	Yes = 1	No = 3	144 \$ 145 146				
12. \\ 13.	Wh Did mo a. b.	at was the average cost per EIA test (including call fee or cost of trad resident equine have a Coggins test or other test for EIA during the nths for any of the following reasons? (Check all that apply.) Change of ownership within State. Show or event requirement within State. Facility (e.g., boarding, breeding) requirement within State	Reason Code	Yes = 1	No = 3	144 \$ 145 146 147 148				
112. \\ 113.	Wh Did mo a. b. c.	at was the average cost per EIA test (including call fee or cost of trad resident equine have a Coggins test or other test for EIA during the nths for any of the following reasons? (Check all that apply.) Change of ownership within State. Show or event requirement within State. Facility (e.g., boarding, breeding) requirement within State. Interstate movement (between two or more States).	Reason Code 1 2 3	Yes = 1	No = 3	144 \$ 145 146 147				
12. \\ 13.	Wh Did mo a. b. c. d.	at was the average cost per EIA test (including call fee or cost of trad resident equine have a Coggins test or other test for EIA during the nths for any of the following reasons? (Check all that apply.) Change of ownership within State. Show or event requirement within State. Facility (e.g., boarding, breeding) requirement within State. Interstate movement (between two or more States). International movement. For personal knowledge.	Reason Code 1 2 3 4 5	Yes = 1	No = 3	144 \$ 145 146 147 148				
12. \\ 13.	Wh Did mo a. b. c. d.	at was the average cost per EIA test (including call fee or cost of trad resident equine have a Coggins test or other test for EIA during the nths for any of the following reasons? (Check all that apply.) Change of ownership within State	Reason Code 1 2 3 4 5	Yes = 1	No = 3	144 \$ 145 146 147 148 149				

Reason

14. Of the choices in item 13 which was the primary reason resident equine had a Coggins test or ot test for EIA during the previous 12 months? (Enter one reason code from item 13)	
Section C. Vaccinations	
Yes = 1 Notes and the previous 12 months?	o = 3
If No, skip to item 20.	
16. Which of the following sources is the primary source from which vaccines were obtained?	
Code	
a. Veterinarian?	Code
b. Feed store or veterinary supply store?	155
c. Catalog/Internet?	
d. Another source? (specify:)	
17. Who administered the MAJORITY of the vaccinations to resident equine in the previous 12 month (Select only one.)	ns?
Code	
a. A veterinarian?	Code
b. Operation personnel (including operator)?	130
c. Equine's owner (not operator)?	
d. Other? (specify:)4	
Questions 18 - 20 refer to resident <u>horses</u> only.	
Yes = 1 No 18. Do you know which diseases your HORSES were vaccinated against in the past 12 months?	= 3 Code
If No. skin to item 21	

19. Were any of the following groups of horses vaccinated for the following diseases in the past 12 months:

		Resident horses 1 year of age or less vaccinated in last 12 months?			Resident broodmares vaccinated in last 12 months?			ares	ove vac	resident h r 1 year of cinated in l2 months?	age last
		If no ho this categor	ry enter "1"			If no hor this category	enter "1"		If no horses in this category enter "1"		
		and skip Colu		514		and skip Colur		515		skip to n 20	516
a.	Flu (Influenza)	1 All 2 Some	3 None 4 DK	158] 1 All] 2 Some	3 None 4 DK	173	1 All 2 Some	3 None 4 DK	188
b.	Strangles (<i>Strep equi</i>)	1 All 2 Some	3 None 4 DK	159] 1 All] 2 Some	3 None 4 DK	174	1 All 2 Some	3 None 4 DK	189
C.	Rhino			160		7 4 411		175			190
	(Herpesvirus)	1 All 2 Some	3 None 4 DK		E	☐ 1 All ☐ 2 Some	3 None 4 DK		☐ 1 All☐ 2 Some	3 None 4 DK	
d.	Rabies	1 All 2 Some	3 None 4 DK	161] 1 All] 2 Some	3 None 4 DK	176	1 All 2 Some	3 None 4 DK	191
e.	West Nile Virus	1 All 2 Some	3 None 4 DK	162] 1 All] 2 Some	3 None 4 DK	177	1 All 2 Some	3 None 4 DK	192
f.	Eastern and Western encephalitis		•								
	(sleeping sickness) (EEE & WEE)	1 All 2 Some	3 None 4 DK	163] 1 All] 2 Some	3 None 4 DK	178	☐ 1 All ☐ 2 Some	3 None 4 DK	193
g.	Tetanus	1 All 2 Some	3 None 4 DK	164] 1 All] 2 Some	3 None 4 DK	179	1 All 2 Some	3 None 4 DK	194
h.	EVA (Equine Viral Arteritis)	1 All 2 Some	3 None	165] 1 All] 2 Some	3 None	180	1 All 2 Some	3 None	195
i.	Venezuelan	Z Goille				_ Z Joine					
	equine										
	encephalitis (VEE)	1 All 2 Some	3 None 4 DK	166		1 All 2 Some	3 None 4 DK	181	1 All 2 Some	3 None 4 DK	196
j.	Clostridium			167		7		182			197
	perfringens (C&D)	1 All 2 Some	☐ 3 None☐ 4 DK			│ 1 All │ 2 Some	3 None 4 DK		1 All 2 Some	3 None 4 DK	
k.	Potomac			168		_		183			198
	Horse Fever (PHF)	1 All 2 Some	3 None 4 DK		E	│ 1 All │ 2 Some	3 None 4 DK		1 All 2 Some	3 None 4 DK	
I.	Rotavirus	1 All 2 Some	3 None 4 DK	169] 1 All] 2 Some	3 None 4 DK	184	1 All 2 Some	3 None 4 DK	199
	A so the second	1 All	3 None	170	F] 1 All	3 None	185	1 All	3 None	200
m. n.	Anthrax (EPM)	2 Some	4 DK	171		2 Some	4 DK	186	2 Some	4 DK	201
	Equine protozoal myelitis	1 All 2 Some	3 None] 1 All] 2 Some	3 None 4 DK		☐ 1 All ☐ 2 Some	3 None	
0.	Other	2 Goille							2 00me		
	(specify:_)			172		7 4 4"		187	□		202
		1 All 2 Some	3 None 4 DK	172		1 All 2 Some	3 None 4 DK	107	1 All 2 Some	3 None 4 DK	202

[Note to enumerator: Please cross-check answers to item 20 (vaccines administered) against those for same vaccines (a - h) in item 19.]

20. We would like to understand why people **do not** use specific horse vaccines. For the vaccines listed below, please indicate whether the vaccine was administered to any resident horse on the operation during the previous 12 months, and if **NOT** administered, give the primary reason.

						Reason Code
•	Concern of adverse reaction to va	accine				1
•	Vaccine considered ineffective					2
•	Little risk of disease exposure					3
•	Not recommended by veterinariar	1				4
•	Financial constraints on horse exp	penditures				5
•	Thought important but did not get	around to it				6
•	Effort and cost of vaccination out	veighed financ	ial and other	benefits of vaccina	ation	7
•	Other reason (specify:)			8
		Yes = 1	No = 3	Were the following vaccines adminited to any resident leading to any resident leading to the following to the following to the following the f	istered (<i>Ente</i> horses? <i>list a</i> R	ary reason : er code from bove.) eason Code
		165 - 1	140 – 3	203	211	
a.	Flu (Influenza)			200	211	
b.	Strangles (Strep equi)			204	212	
C.	Rhino (Herpesvirus)			205	213	
d.	Rabies			206	214	
e.	West Nile Virus			207	215	
f.	Eastern and Western			208	216	
	encephalitis (sleeping sickness) (EEE & WEE)					
g.	Tetanus			209	217	
h.	EVA (Equine Viral Arteritis)			210	218	

Section D. Health Events

Note: The following questions refer to resident equine (not just horses).

					Code
21	Dur	ing the past 12 months, did you have any resident foals less than	Yes = 1	No = 3	219
		onths old on the premises?			
	If N	o, skip to item 25.			
22.		v many different resident foals less than 6 months of age were treated with a ng the previous 12 months?			
23.	12 ı	w many resident foals less than 6 months old became affected with the follow months, and of those affected how many received antibiotics at least once? [Indicate of the image of the ima	Notě: Nu	nditions during <i>imber of anima</i>	the previous als with Of these foals, number that
			-	mber of foals	received antibiotics at least once
	a.	Colic?	221		238
	b.	Other digestive problems (e.g., diarrhea)?	222		239
	C.	Respiratory problems (e.g., pneumonia, strangles, <i>Rhodococcus equi</i> , etc)?.	223	,	240
	d.	Eye problems?	224		241
	e.	Skin problems?	225		242
	f.	Reproductive tract problems (e.g., hermaphrodite, cryptorchid)?	226		243
	g.	Behavioral problems (e.g., unusual, affects use or safety)?	227		244
	h.	Injury, wounds, or trauma?	228		245
	i.	Lameness, leg, or hoof problems (could not be used for intended purpose without treatment)?	229		246
	j.	Neurologic problems (e.g. spinal problem, wobblers, seizure, EPM, West Nile virus, sleeping sickness, maladjustment syndrome)?	e 230		247
	k.	Infectious disease unrelated to specific body system (septicemia, blood infection)?	231		248
	I.	Chronic weight loss?	232		249
	m.	Overweight/obese?	233		250
	n.	Failure to get milk or colostrum from mare/dam?	234		251
	0.	Complications from birthing /dystocia?	235		252
	p.	Fever of undetermined origin?	236		253
	q.	Other? (specify:)	237		254
	r.	Treated with antibiotic to prevent disease (No condition present)?		NA	255

24.		em 23c (respiratory problems) is greater than zero, how many resident foals less re diagnosed with having the infection <i>Rhodococcus equi</i> ?						
				257				
	a.	How many of these foals died (including euthanasia)?						
		, G						
25.		w many different resident equine 6 months of age or older were treated with a ing the previous 12 months?						
26.	ma not	w many resident equine 6 months of age or older became affected with the owing conditions during the previous 12 months, and of those affected how ny received antibiotics at least once. [Note: Number of animals with condition, number of episodes. One equine could have more than one condition.]	Number of equine	Of these Equine, number that received antibiotics at least once				
	a.	Colic?	259	276				
	b.	Other digestive problems (e.g., diarrhea)?	260	277				
	C.	Dental problems?	261	278				
	d.	Respiratory problems?	262	279				
	e.	Eye problem?	263	280				
	f.	Skin problems?	264	281				
	g.	Reproductive problems (e.g.,infertility, dystocia)?	265	282				
	h.	Behavioral problems (e.g., unusual, affects use or safety)?	266	283				
	i.	Injury, wounds, or trauma?	267	284				
	j.	Lameness, leg, or hoof problems (could not be used for intended purpose without treatment)?	268	285				
	k.	Neurologic problems (e.g. spinal problem, wobblers, seizure, West Nile virus, EPM)?	269	286				
	l.	Infectious disease unrelated to specific body system (septicemia, blood infections)?	270	287				
	m.	Chronic weight loss?	271	288				
	n.	Overweight/obese?	272	289				
	0.	Liver or kidney disease?	273	290				
	p.	Cancer?	274	291				
	q.	Other? (specify:)	275	292				
	r.	Treated with antibiotic to prevent disease (No condition present)?	NA	293				
27.	27. How many equine were born alive, or were born dead or aborted, on this operation during the previous 12 months? a. Born alive?							
	b.	Born dead or aborted?		295				
	٠.	2011 4044 01 4801104						
If it	If item 27a = 0, skip to item 29.							
28. How many of the foals born alive in the previous 12 months died (including euthanasia):								
	a. At less than or equal to 2 days old?							
				297				
	b.	From 3 to 30 days old?						

29.		w many foals 30 days or less of age moved onto the operation during the vious 12 months?	298	
If it	em	29 = 0, skip to item 30.		
	a.	How many of these foals died before or at 30 days of age?	299	
30.		Id items 28a, 28b, and 29a.] Then the total number of foal deaths in the first 30 days of life during previous 12 months was:	300	
If it	em	30 = 0, skip to item 32.		
31.	Ηον	w many of the total foal deaths in the first 30 days of life (item 30) were due PRIMARILY to:		
	2	+ Colic?	301	
	b.	Other digestive problems (e.g. diarrhea)?	302	
	C.	+ Respiratory problems? (eg., pneumonia, strangles, <i>Rhodococcus equi, etc.</i>)	303	
	d.	Neurologic problems (e.g. spinal problem, wobblers, seizure, EPM, West Nile virus, sleeping + sickness, maladjustment syndrome)?	304	
	e.	bystocia, trauma, or complications at birth?	305	
	f.	+ Birth defects?	306	
	g.	Injury, wounds, or trauma unrelated to birth?	307	
	h.	Infectious disease unrelated to specific body system, blood infection (septicemia)? +	308	
	i.	+ Failed to get colostrum or milk from mare?	309	
	j.	Other known cause? (specify:)	310	
	k.	Unknown cause?	311	
	l.	Total [Add items 31a - 31k; should equal item 30.]. =	312	
32.		any resident equine greater than 30 days of age die, or were any hanized, during the previous 12 months?	314	Code

If item 32 = No, skip to item 35.

33.		w many resident equine greater than 30 days of age died or were euthowing ages:	naniz	ed during the previous	s 12 months at the
					Resident equine
	a.	Greater than 30 days but less than 6 months of age?		 +	315
	b.	6 months to less than 5 years of age?		+	316
	C.	5 years to less than 20 years of age?		+	317
	d.	20 years to less than 30 years of age?		+	318
	e.	30 years of age or older?		+	319
	f.	Total number of deaths of equine greater than 30 days of age [Add ite.	ms 33	3a – 33e.] =	320
34.	Ho	w many of these deaths (item 33f) were due PRIMARILY TO:		Resident equine greater than 30 days and less than 6 months of age	Resident equine 6 months of age or greater
	a.	Colic?	+	321	337
	b.	Other digestive problems (e.g., diarrhea)?	+	322	338
	C.	Strangles?	+	323	339
	d.	Other respiratory problems?	+	324	340
	e.	Neurologic problems (e.g. spinal problem, wobblers, seizure, West Nile virus, EPM)?	+	325	341
	f.	Dystocia or birthing complications?	+	326	342
	g.	Reproductive problems other than dystocia?		327	343
	h.	Injury, wounds, or trauma?	+	328	344
	i.	Lameness, leg, or hoof problems (could not be used for intended purpose without treatment)?	+	329	345
	i.	Old age?	+	NA	346
	k.	Cancer?	+	330	347
	I.	Liver or kidney disease?	+	331	348
	m.	Fire, lightning strike, flood, or other storm?	+	332	349
	n.	Poisoning/toxicity (suspected or confirmed)?	_	333	350
	0.	Other known cause? (specify:)		334	351
	p.	Unknown cause?	+	335	352
	а.	Totals	=	336	353
	•			=item 33a	=items 33b - 33e
35.	rise def	ring the past 12 months, did any resident equine become nonambulator r the purposes of this question, "nonambulatory" means unable to stand on its own, i.e., without assistance, for any length of time. For equine, inition also includes animals that can stand, but not walk, e.g., due to	this	Yes = 1 No = 3	Code 354
	sev _	rere laminitis.)			
If N	o, s	kip to item 41.			

B. Donkeys or burnos?. 355 356	36	. Ho	w many of the following types of resident equine became non	am	bulatory in the las	t 12 months?		
D. Intues?		a.	Donkeys or burros?			+	35	5
C. FORIBEST State		b.	Mules?			+	356	6
1.		C.	Ponies?			+	357	7
Book Horses (excluding miniature horses)?		d.	Miniature horses?			+	358	8
F. Other resident equine? 380 381 380 381 381 381 382 381 382 381 382 381 382 381 382 383 382 383 382		e.					359	9
37. How many resident equine in the following age categories became nonambulatory in the last 12 months? 38. Birth to 30 days of age.		f.	,			_	360	0
a. Birth to 30 days of age			·				36	1
a. Birth to 30 days of age	27	Цо	w many regident equipe in the following age estagation becar	no 1	nonombulator, in	the last 12 man	tha?	
b. Greater than 30 days but less than 6 months of age. c. 6 months to less than 5 years of age. d. 5 years to less than 20 years of age. e. 20 years to less than 30 years of age. f. 30 years of age or older. g. Total [Add items 37a - 37f; should equal item 36g.] 38. How many resident equine became nonambulatory from the following primary reason: Resident equine birth to 30 days to less than 6 months of age or older. a. Colic or other digestive problems (e.g. diarrhea)? 4. Respiratory problem? 6. Reproductive problems? 6. Reproductive problems? 6. Injury, wounds, or trauma? 7. Lameness, leg, or hoof problems (could not be used for intended purpose without treatment)? 7. Neurologic problems? (e.g., spinal problem, wobblers, seizure, EPM, West Nile virus, sleeping sickness). g. Other known cause? 9. Other known cause? 10. Totals (should equal item 37g.) 11. Totals (should equal item 37g.) 12. Totals (should equal item 37g.) 13. How was the cause of the nonambulatory state diagnosed? (If no diagnosis, enter No for all.) 14. Veterinary exam before animal became nonambulatory? 15. Veterinary exam after animal became nonambulatory? 16. Veterinary exam after animal became nonambulatory? 17. Postmortem veterinary exam (necropsy or autopsy)? 18. Veterinary exam after animal became nonambulatory? 18. Jose Jose Jose Jose Jose Jose Jose Jose	31				•			2
C. 6 months to less than 5 years of age. 364 365 366 367 368 367 368 367 368							_	
d. 5 years to less than 30 years of age.								
Colic or other digestive problems (e.g. diarrhea)?			, ,					
f. 30 years of age or older. g. Total [Add items 37a - 37f; should equal item 36g.] = 3668 38. How many resident equine became nonambulatory from the following primary reason: Resident equine birth to 30 days to less than 6 months of age of ag		d.						
g. Total [Add items 37a - 37f; should equal item 36g.] = 368 38. How many resident equine became nonambulatory from the following primary reason: Resident equine birth to 30 days of age 378 387 388 370 379 388 370 379 388 370 379 388 370		e.						
38. How many resident equine became nonambulatory from the following primary reason: Resident equine greater than 30 days to less than 6 months of age or greater than 30 days to less than		f.	30 years of age or older					
Resident equine problems Resident equine to less than 6 Resident equine to less than 389		g.	Total [Add items 37a - 37f; should equal item 36g.]			=	= 300	ŏ
b. Respiratory problem?	38	. Ho	w many resident equine became nonambulatory from the follo	wir	ng primary reaso	n:		
c. Reproductive problems? (e.g., dystocias or birthing problems). d. Injury, wounds, or trauma?	38	. Ho	w many resident equine became nonambulatory from the follo	owir	Resident equine birth to 30 days	Resident equine greater than 30 days to less than 6		onths of age or
c. Reproductive problems? (e.g., dystocias or birthing problems). d. Injury, wounds, or trauma?	38		Colic or other digestive problems (e.g. diarrhea)?		Resident equine birth to 30 days of age	Resident equine greater than 30 days to less than 6 months of age	6 mc	onths of age or
e. Lameness, leg, or hoof problems (could not be used for intended purpose without treatment)? f. Neurologic problems? (e.g., spinal problem, wobblers, seizure, EPM, West Nile virus, sleeping sickness). g. Other known cause? (specify:)+ h. Unknown cause?+ i. Totals (should equal item 37g.)= 1	38	a.	Colic or other digestive problems (e.g. diarrhea)?	++	Resident equine birth to 30 days of age 369 370	Resident equine greater than 30 days to less than 6 months of age 378 379	6 m c 387 388	onths of age or
e. Lameness, leg, or hoof problems (could not be used for intended purpose without treatment)? f. Neurologic problems? (e.g., spinal problem, wobblers, seizure, EPM, West Nile virus, sleeping sickness). g. Other known cause? (specify:	38	a. b.	Colic or other digestive problems (e.g. diarrhea)?	++	Resident equine birth to 30 days of age 369 370	Resident equine greater than 30 days to less than 6 months of age 378 379	6 m c 387 388	onths of age or
g. Other known cause? (specify:). + 375	38	a. b. c.	Colic or other digestive problems (e.g. diarrhea)?	+ + +	Resident equine birth to 30 days of age 369 370	Resident equine greater than 30 days to less than 6 months of age 378 379	387 388 389	onths of age or
h. Unknown cause? + 376 385 394 i. Totals (should equal item 37g.) = item 37a = item 37b = items 37c - 37f 39. How was the cause of the nonambulatory state diagnosed? (If no diagnosis, enter No for all.) Yes = 1 No = 3 Code a. Veterinary exam before animal became nonambulatory?	38	a. b. c.	Colic or other digestive problems (e.g. diarrhea)?	+ + + + +	Resident equine birth to 30 days of age 369 370 371	Resident equine greater than 30 days to less than 6 months of age 378 379 380	387 388 389 390	onths of age or
i. Totals (should equal item 37g.). = 377 386 395 = item 37a = item 37b = items 37c – 37f 39. How was the cause of the nonambulatory state diagnosed? (If no diagnosis, enter No for all.) Yes = 1 No = 3 Code a. Veterinary exam before animal became nonambulatory? 396 b. Veterinary exam after animal became nonambulatory? 397 c. Postmortem veterinary exam (necropsy or autopsy)? 398	38	a. b. c. d.	Colic or other digestive problems (e.g. diarrhea)?	+ + + + +	Resident equine birth to 30 days of age 369 370 371 372 373	Resident equine greater than 30 days to less than 6 months of age 378 379 380 381	387 388 389 390 391	onths of age or
= item 37a = item 37b = items 37c – 37f 39. How was the cause of the nonambulatory state diagnosed? (If no diagnosis, enter No for all.) Yes = 1 No = 3 Code a. Veterinary exam before animal became nonambulatory?	38	a. b. c. d. e.	Colic or other digestive problems (e.g. diarrhea)? Respiratory problem? Reproductive problems? (e.g., dystocias or birthing problems). Injury, wounds, or trauma? Lameness, leg, or hoof problems (could not be used for intended purpose without treatment)?. Neurologic problems? (e.g., spinal problem, wobblers, seizure, EPM, West Nile virus, sleeping sickness).	+ + + + + +	Resident equine birth to 30 days of age 369 370 371 372 373	Resident equine greater than 30 days to less than 6 months of age 378 379 380 381 382	387 388 389 390 391	onths of age or
39. How was the cause of the nonambulatory state diagnosed? (If no diagnosis, enter No for all.) Yes = 1 No = 3 Code a. Veterinary exam before animal became nonambulatory?	38	a. b. c. d. e. f.	Colic or other digestive problems (e.g. diarrhea)? Respiratory problem? Reproductive problems? (e.g., dystocias or birthing problems). Injury, wounds, or trauma?. Lameness, leg, or hoof problems (could not be used for intended purpose without treatment)?. Neurologic problems? (e.g., spinal problem, wobblers, seizure, EPM, West Nile virus, sleeping sickness). Other known cause? (specify:).	+ + + + + +	Resident equine birth to 30 days of age 369 370 371 372 373 374	Resident equine greater than 30 days to less than 6 months of age 378 379 380 381 382 383	387 388 389 390 391 392	onths of age or
a. Veterinary exam before animal became nonambulatory? b. Veterinary exam after animal became nonambulatory? c. Postmortem veterinary exam (necropsy or autopsy)? Yes = 1 No = 3 396 397 397 398	38	a. b. c. d. e. f.	Colic or other digestive problems (e.g. diarrhea)? Respiratory problem?. Reproductive problems? (e.g., dystocias or birthing problems). Injury, wounds, or trauma?. Lameness, leg, or hoof problems (could not be used for intended purpose without treatment)?. Neurologic problems? (e.g., spinal problem, wobblers, seizure, EPM, West Nile virus, sleeping sickness). Other known cause? (specify:). Unknown cause?.	+ + + + + + + + +	Resident equine birth to 30 days of age 369 370 371 372 373 374 375 376	Resident equine greater than 30 days to less than 6 months of age 378 379 380 381 382 383 384 385	387 388 389 390 391 392 393 394	onths of age or
a. Veterinary exam before animal became nonambulatory?	38	a. b. c. d. e. f.	Colic or other digestive problems (e.g. diarrhea)? Respiratory problem?. Reproductive problems? (e.g., dystocias or birthing problems). Injury, wounds, or trauma?. Lameness, leg, or hoof problems (could not be used for intended purpose without treatment)?. Neurologic problems? (e.g., spinal problem, wobblers, seizure, EPM, West Nile virus, sleeping sickness). Other known cause? (specify:). Unknown cause?.	+ + + + + + + + +	Resident equine birth to 30 days of age 369 370 371 372 373 374 375 376 377	Resident equine greater than 30 days to less than 6 months of age 378 379 380 381 382 383 384 385 386	387 388 389 390 391 392 393 394 395	onths of age or greater
b. Veterinary exam after animal became nonambulatory?		a. b. c. d. e. f. g. h. i.	Colic or other digestive problems (e.g. diarrhea)? Respiratory problem? Reproductive problems? (e.g., dystocias or birthing problems). Injury, wounds, or trauma?. Lameness, leg, or hoof problems (could not be used for intended purpose without treatment)?. Neurologic problems? (e.g., spinal problem, wobblers, seizure, EPM, West Nile virus, sleeping sickness). Other known cause? (specify:). Unknown cause?. Totals (should equal item 37g.).	+ + + + + + + =	Resident equine birth to 30 days of age 369 370 371 372 373 374 375 376 377 = item 37a iagnosis, enter No	Resident equine greater than 30 days to less than 6 months of age 378 379 380 381 382 383 384 385 386 = item 37b for all.)	387 388 389 390 391 392 393 394 395	onths of age or greater
c. Postmortem veterinary exam (necropsy or autopsy)?		a. b. c. d. e. f. g. h. i.	Colic or other digestive problems (e.g. diarrhea)? Respiratory problem? Reproductive problems? (e.g., dystocias or birthing problems). Injury, wounds, or trauma? Lameness, leg, or hoof problems (could not be used for intended purpose without treatment)?. Neurologic problems? (e.g., spinal problem, wobblers, seizure, EPM, West Nile virus, sleeping sickness). Other known cause? (specify:). Unknown cause? Totals (should equal item 37g.).	+ + + + + + = codi	Resident equine birth to 30 days of age 369 370 371 372 373 374 375 376 377 = item 37a iagnosis, enter No Yes =	Resident equine greater than 30 days to less than 6 months of age 378 379 380 381 382 383 384 385 386 = item 37b for all.)	387 388 389 390 391 392 393 394 395 = ite	ems 37c – 37f
c. Tostinorem vetermary exam (necropsy of autopsy):		a. b. c. d. e. f. g. h. i.	Colic or other digestive problems (e.g. diarrhea)? Respiratory problem? Reproductive problems? (e.g., dystocias or birthing problems). Injury, wounds, or trauma?. Lameness, leg, or hoof problems (could not be used for intended purpose without treatment)?. Neurologic problems? (e.g., spinal problem, wobblers, seizure, EPM, West Nile virus, sleeping sickness). Other known cause? (specify:). Unknown cause?. Totals (should equal item 37g.). w was the cause of the nonambulatory state diagnosed? (If no Veterinary exam before animal became nonambulatory?	+ + + + + + + = co di	Resident equine birth to 30 days of age 369 370 371 372 373 374 375 376 377 = item 37a iagnosis, enter No Yes =	Resident equine greater than 30 days to less than 6 months of age 378 379 380 381 382 383 384 385 386 = item 37b for all.)	387 388 389 390 391 392 393 394 395 = ite	ems 37c – 37f
d. Other? (specify:)		a. b. c. d. e. f. g. h. i. Ho	Colic or other digestive problems (e.g. diarrhea)? Respiratory problem? Reproductive problems? (e.g., dystocias or birthing problems). Injury, wounds, or trauma? Lameness, leg, or hoof problems (could not be used for intended purpose without treatment)? Neurologic problems? (e.g., spinal problem, wobblers, seizure, EPM, West Nile virus, sleeping sickness). Other known cause? (specify:). Unknown cause? Totals (should equal item 37g.). w was the cause of the nonambulatory state diagnosed? (If no Veterinary exam before animal became nonambulatory?	+ + + + + + = o di	Resident equine birth to 30 days of age 369 370 371 372 373 374 375 376 377 = item 37a iagnosis, enter No Yes =	Resident equine greater than 30 days to less than 6 months of age 378 379 380 381 382 383 384 385 386 = item 37b for all.)	387 388 389 390 391 392 393 394 395 = ite	ems 37c – 37f

40. Ho	ow many nonambulatory resident equine had the following outcome?				
					Resident Equine
a.	Died (not euthanized)?				400
b.	Euthanized?			+	401
C.	Recovered to full function and remained on premises?			+	402
d.	Recovered to full function and sold or moved off premises?				403
e.	Recovered to partial function and remained on premises?			+	404
f.	Recovered to partial function and sold or moved off premises?			+	405
g.	Moved off premises while nonambulatory?			+	406
h.	Other (specify:)?				407
i.	Total [should equal item 36g.]?				408
	Section E. Movement				
	uring the previous 12 months, how many NONRESIDENT equine came				100
ies	ss than 30 consecutive days?				409
If item	41 = 0, skip to item 43.				
	or the majority of these nonresident equine (item 41), did you (this oper ever require:	ration) alway	ys require, so	metimes	require, or
		_	Sometimes = 2	Never = 3	
a.	Official health certificate (CVI)?				410
b.	Veterinary examination other than for official health certificate?				411
C.	Coggins test (EIA test, Swamp Fever test)?				412
d.	Vaccination within past year?				413
e.	Deworming within past year?				414
f.	Screening test for strangles or history of no occurrence in past 6 months?				415
g.	Other past medical history from owner?				416
h.	Quarantine prior to contact with resident equine?				417
i.	Anything else? (specify:)				418
42 Di	d vou add any new resident equine, including feels bern to a penreside	ant mara ta	Yes = 1	No = 3	Code
	d you add any new resident equine, including foals born to a nonreside s operation during the previous 12 months (excluding births to residen				419
If No.	skip to item 47.				
,					
					Number Equine
					,

45.	Нον	w many of the equine added (item 44) came from:					
						Nun	nber Equine
	a.	Within State?			+	421	
	b.	Outside State, within U.S.?			+	422	
	C.	Canada?			+	423	
	d.	Mexico?			+	424	
	e.	Outside North America?			+	425	
	f.	Unknown location?			+	426	
	g.	Total [Add items 45a - 45f; should equal item 44.]			=	427	
46.		the majority of these new resident equine, did you (this oper uire:	ation) alway	s require, some	etimes requ	uire, o	
			Always = 1	Sometimes = 2	Never = 3	400	Code
	a.	Official health certificate (CVI)?				428	
	b.	Veterinary examination other than for official health certificate?				429	
	C.	Coggins test (EIA test, Swamp Fever test)?				430	
	d.	Vaccination within past year?				431	
	e.	Deworming within past year?				432	
	f.	Screening test for strangles or no occurrence in past 6 months?				433	
	g.	Other past medical history from owner?	П	П	П	434	
	h.	Quarantine prior to contact with resident equine?				435	
	i.	Anything else (specify:)?				436	
				Yes = 1	No = 3		Code
47.		ring the previous 12 months, did any resident equine leave th I return, whether or not by vehicle?				437	
If N	o, s	kip to item 51.					
48.		resident equine that left and returned during the previous 12					Miles
		icle), what was the maximum one-way distance traveled (fain the home operation)?				438	
				Yes =	1 No = 3		Code
49.		ing the previous 12 months, were any resident equine transp (home) operation for any purpose and returned?	orted by ve	hicle off		439	
If N	0 6	kip to item 51.					
	J, J	mp to italii vii					

		r resident equine that were transported by vehicle and returned , how meach of the following destinations (regardless of number of equine transported)			in the la	st 12 months
					Nu	mber of trips
	a.	Within State?				440
	b.	Outside State, to adjacent State?				441
	C.	Outside State, beyond adjacent States (including Alaska and Hawaii)?.				442
	d.	Canada?				443
	e.	Mexico?				444
	f.	Outside North America?				445
51.	pre equ	r this question, the term "isolate" means to prevent nose-to-nose contact event sharing of feed, drinking water, and equipment, such as brushes, c uine. Which of the following best describes the operation's general prac- eration, have direct contact with outside equine, and return? (Select one	comb, hoof tice when r	picks, and b	ouckets, t uine leave	etween
	a.	Resident equine never leave premises or never have contact with outs	ide equine.	1	1	
	b.	Routinely isolate after return to home operation		2		Code
	C.	Only isolate for a cause such as disease or known exposure to disease	e	3	_ ~	446
	d.	Routinely isolate before return to home operation		4		
	e.	Never isolate returning equine		5	•	
52.	Ha	ve you been asked for your equine's health papers (health certificate, Co	oggins test) in the prev	ious 5 y	ears?
			Yes = 1	NA = 2	No = 3	Code
	a.	At a Ctata hardar/antru naint			П	447
		At a State border/entry point	_			
	b.	For international transport.				448
			_			448 449
	b. c.	For international transport	_			
	b. c.	For international transport. At a show/event.	_			449
	b. c. d.	For international transport. At a show/event. At a sale.	_			449 450
	b. c. d. e.	For international transport. At a show/event. At a sale. At a private farm/facility.	_			449 450 451
	b. c. d. e. f.	For international transport. At a show/event. At a sale. At a private farm/facility. At a race track. Other (specify:).				449 450 451 452
	b. c. d. e. f. g.	For international transport. At a show/event. At a sale. At a private farm/facility. At a race track. Other (specify:). Section F. General Managements.				449 450 451 452 453
	b. c. d. e. f. g.	For international transport. At a show/event. At a sale. At a private farm/facility. At a race track. Other (specify:).		ing onto the	·	449 450 451 452 453
	b. c. d. e. f. g.	For international transport. At a show/event. At a sale. At a private farm/facility. At a race track. Other (specify:). Section F. General Management infection control, do you ever require people (visitor, veterinarian, farries of the following:	ent con	ing onto the	e equine No = 3	449 450 451 452 453 facility to do
	b. c. d. e. f. g.	For international transport. At a show/event. At a sale. At a private farm/facility. At a race track. Other (specify:	ent er, etc.) con	ning onto the	·	449 450 451 452 453 facility to do Code
	b. c. d. e. f. g. For any a. b.	For international transport. At a show/event. At a sale. At a private farm/facility. At a race track. Other (specify:	ent com	ing onto the	·	449 450 451 452 453 facility to do
	b. c. d. e. f. g. For any a. b. c.	For international transport. At a show/event. At a sale. At a private farm/facility. At a race track. Other (specify:). Section F. General Management infection control, do you ever require people (visitor, veterinarian, farries of the following: Use separate or disinfected equipment?. Change clothes or wear clean coveralls?. Disinfect or change boots?	ent er, etc.) con	ning onto the	·	449 450 451 452 453 facility to do Code 454 455
	b. c. d. e. f. g. For any a. b.	For international transport. At a show/event. At a sale. At a private farm/facility. At a race track. Other (specify:	ent er, etc.) con	ning onto the	·	449 450 451 452 453 facility to do Code 454 455 456

			/es = 1	Do not Isolate = 2	No = 3	Codo
E 1	ı£ v	ou have animals separated for isolation or infection control, do you	_		10 - 3	Code 460
J 4 .		trict movement of personnel working with isolated animals?	Ш	Ш		400
	D	do a the considered 40 are at the child the fellowing a painted become about a least	-4	-1-1	41 2	. f d.
55.	Dui	ring the previous 12 months, did the following animals have physical contact	ct with re	-		
				Yes = 1	No = 3	Code
	a.	Poultry?				461
	b.	Pigs?			Ш	462
	C.	Cattle?				463
	d.	Sheep/goats?				464
	e.	Liamas or alpacas?				465
	f.	Emus/ostriches?				466
	g.	Dogs?				467
	h.	Cats?				468
	i.	Skunks?				469
	j.	Opossums?				470
	k.	Bats?				471
	I.	Raccoons?				472
	m.	Other? (specify:)				473
				Yes = 1	No = 3	Code
56.	Did	l you feed grain concentrate/energy source (beyond hay or pasture forage)	during	100 1	Г	174
		previous 12 months?				
If N	o, s	skip to item 59.				
5 7	\ \ /b	nat percent of the grain/concentrate fed during the previous 12 months was	from the	following or	vurooo:	
J1.	VVII	iat percent of the grain/concentrate led during the previous 12 months was	nom me	ioliowing sc	Jui Ces.	Percent
	_	Durch good in horse (rotail course)			. [
	a.	Purchased in bags (retail source)?				475
	b.	Bulk delivery from retail source?			+	476
	C.					
		Bulk delivery from nonretail source?			+	477
	d.	Home grown?			. +	477 478
	d. e.	•			. +	
	e.	Home grown?			+ . + =	478
58.	e.	Home grown?			+ . + =	478 479
58.	e.	Home grown?	: s fecal c	ontaminatio	+	478 479 =100% Code
58.	e.	Home grown?	:s fecal c	ontaminatio	+	478 479 =100%
58.	e. Do	Home grown?	s fecal c	ontaminatio	+	478 479 =100% Code
58.	e. Do a.	Home grown? Other? (specify:). you store the grain/concentrate on this operation in a manner that prevent Mice or rats?	s fecal c	ontaminatio	+	478 479 =100% Code 480
58.	e. Do a. b.	Home grown? Other? (specify:). you store the grain/concentrate on this operation in a manner that prevent Mice or rats?. Domestic or wild birds, including poultry?.	s fecal c	ontaminatio	+	478 479 =100% Code 480

a. Well.	59. Which of the following was the predominant source of drinking water for resident equine during the previous months? (Select one only.)						s 12
b. Public/municipal water supply. c. Spring. d. Surface water such as a pond, stream, river, or cistern. e. Other (specify:					Code		
c. Spring. d. Surface water such as a pond, stream, river, or cistern. e. Other (specify:		a.	Well		1		
Countrage water such as a pond, stream, river, or cistern.		b.	Public/municipal water supply		2		Code
60. During this insect season, have any of the following insect control methods been used: Yes = 1 No = 3 Code a. Repellents applied to equine? 486		C.	Spring		3	485	
60. During this insect season, have any of the following insect control methods been used: Yes = 1 No = 3 Code As Repellents applied to equine? 486 487 b. Insecticides applied to in or near equine housing area? 488 488 d. Regional control program, such as aerial spraying? 489 490 e. Sticky tape? 490 491 492 f. Bug zapper? 491 492 h. Face mask on equine? 493 493 i. Fly tags attached to equine halters? 494 495 j. Fly sheets on equine? 495 k. Insect control product in feed, such as using Equitrol®? 496 l. Mosquito treatment in drinking water? (mosquito dunks) 497 m. Water container emptied and refilled with fresh water at least weekly? 498 n. Frequent removal of weeds and manure from premises? 496 o. Screened-in stalls? 600 p. Other? (specify:) 601 61. Which of the following disposal methods for manure (including composted manure) and/or waste bedding were used on this operation during the previous 12 months? Yes = 1 No = 3 Code A. Routine garbage pickup. 503 b. Hauled to landfill (not routine garbage pickup) 503 c. Hauled away, other than to a landfill. 604 d. Applied on fields on the operation where any livestock (including equine) graze 605 e. Applied on field on the operation where no livestock graze 606 f. Manure/waste bedding allowed to accumulate or left to nature 607 g. Sold or gave away. 600 600 g. Sold or gave away. 600 g. Sold or ga		d.	Surface water such as a pond, stream, river, or cistern		4		
No = 3 Code		e.	Other (specify:)		5		
a. Repellents applied to equine? 486 b. Insecticides applied to in or near equine housing area? 487 c. Insecticides applied to pasture areas? 488 d. Regional control program, such as aerial spraying? 499 e. Sticky tape? 490 f. Bug zapper? 491 g. Parasitic wasps specifically brought onto the operation? 492 h. Face mask on equine? 493 i. Fly tags attached to equine halters? 494 j. Fly sheets on equine? 495 k. Insect control product in feed, such as using Equitrol®? 496 l. Mosquito treatment in drinking water? (mosquito dunks) 497 m. Water container emptied and refilled with fresh water at least weekly? 498 n. Frequent removal of weeds and manure from premises? 49 o. Screened-in stalls? 500 p. Other? (specify:) 501 61. Which of the following disposal methods for manure (including composted manure) and/or waste bedding were used on this operation during the previous 12 months? Yes = 1 No = 3 Code 502 b. Hauled to landfill (not routine garbage pickup) 503 c. Hauled away, other than to a landfill. 505 d.	60.	Dur	ing this insect season, have any of the following insect control methods been	used:			
b. Insecticides applied to equine? c. Insecticides applied to pasture areas? d. Regional control program, such as aerial spraying? e. Sticky tape? f. Bug zapper? g. Parasitic wasps specifically brought onto the operation? h. Face mask on equine? i. Fly tags attached to equine halters? j. Fly sheets on equine? k. Insect control product in feed, such as using Equitrol®? k. Insect control product in feed, such as using Equitrol®? m. Water container emptied and refilled with fresh water at least weekly? n. Frequent removal of weeds and manure from premises? p. Other? (specify: 61. Which of the following disposal methods for manure (including composted manure) and/or waste bedding were used on this operation during the previous 12 months? Yes = 1 No = 3 Code a. Routine garbage pickup. b. Hauled to landfill (not routine garbage pickup). c. Hauled away, other than to a landfill d. Applied on fields on the operation where any livestock (including equine) graze. e. Applied on field on the operation where no livestock graze f. Manure/waste bedding allowed to accumulate or left to nature. g. Sold or gave away.				Yes = 1	No = 3		Code
c. Insecticides applied to pasture areas? 488 d. Regional control program, such as aerial spraying? 489 e. Sticky tape? 490 f. Bug zapper? 491 g. Parasitic wasps specifically brought onto the operation? 492 h. Face mask on equine? 493 i. Fly tags attached to equine halters? 494 j. Fly sheets on equine? 495 k. Insect control product in feed, such as using Equitrol®? 496 l. Mosquito treatment in drinking water? (mosquito dunks) 497 m. Water container emptied and refilled with fresh water at least weekly? 498 n. Frequent removal of weeds and manure from premises? 499 o. Screened-in stalls? 500 p. Other? (specify:		a.	Repellents applied to equine?			486	
d. Regional control program, such as aerial spraying?		b.	Insecticides applied to in or near equine housing area?			487	
e. Sticky tape?		C.	Insecticides applied to pasture areas?			488	
e. Sitcky lape? 481 g. Parasitic wasps specifically brought onto the operation? 482 h. Face mask on equine? 493 i. Fly tags attached to equine halters? 494 j. Fly sheets on equine? 495 k. Insect control product in feed, such as using Equitrol®? 496 l. Mosquito treatment in drinking water? (mosquito dunks) 497 m. Water container emptied and refilled with fresh water at least weekly? 498 n. Frequent removal of weeds and manure from premises? 49 o. Screened-in stalls? 500 p. Other? (specify:) 501 61. Which of the following disposal methods for manure (including composted manure) and/or waste bedding were used on this operation during the previous 12 months? Yes = 1 No = 3 Code b. Hauled to landfill (not routine garbage pickup) 502 503 504 d. Applied on fields on the operation where any livestock (including equine) graze. 505 505 e. Applied on field on the operation where no livestock graze 506 507 g. Sold or gave away. 508		d.	Regional control program, such as aerial spraying?			489	
g. Parasitic wasps specifically brought onto the operation? 492		e.	Sticky tape?			490	
h. Face mask on equine? i. Fly tags attached to equine halters? j. Fly sheets on equine? l. Mosquito treatment in drinking water? (mosquito dunks) m. Water container emptied and refilled with fresh water at least weekly? m. Water container emptied and refilled with fresh water at least weekly? m. Frequent removal of weeds and manure from premises? m. Vest of the following disposal methods for manure from premises? m. Frequent removal of weeds and manure from premises? m. Vest of the following disposal methods for manure from premises? m. Frequent removal of weeds and manure from premises? m. Vest of the following disposal methods for manure from premises? m. Freq		f.	Bug zapper?			491	
i. Fly tags attached to equine halters?		g.	Parasitic wasps specifically brought onto the operation?			492	
j. Fly sheets on equine?		h.	Face mask on equine?			493	
k. Insect control product in feed, such as using Equitrol®? 496		i.	Fly tags attached to equine halters?			494	
I. Mosquito treatment in drinking water? (mosquito dunks) 497 m. Water container emptied and refilled with fresh water at least weekly? 498 n. Frequent removal of weeds and manure from premises? 49 o. Screened-in stalls? 500 p. Other? (specify: 501 61. Which of the following disposal methods for manure (including composted manure) and/or waste bedding were used on this operation during the previous 12 months? Yes = 1 No = 3 Code a. Routine garbage pickup. 502 b. Hauled to landfill (not routine garbage pickup). 503 c. Hauled away, other than to a landfill. 504 d. Applied on fields on the operation where any livestock (including equine) graze. 505 e. Applied on field on the operation where no livestock graze 507 g. Sold or gave away. 508		j.	Fly sheets on equine?			495	
m. Water container emptied and refilled with fresh water at least weekly? 498		k.	Insect control product in feed, such as using Equitrol®?			496	
n. Frequent removal of weeds and manure from premises? 49		l.	Mosquito treatment in drinking water? (mosquito dunks)			497	
o. Screened-in stalls? p. Other? (specify:). 61. Which of the following disposal methods for manure (including composted manure) and/or waste bedding were used on this operation during the previous 12 months? Yes = 1 No = 3 Code a. Routine garbage pickup. b. Hauled to landfill (not routine garbage pickup). c. Hauled away, other than to a landfill. d. Applied on fields on the operation where any livestock (including equine) graze. e. Applied on field on the operation where no livestock graze. f. Manure/waste bedding allowed to accumulate or left to nature. g. Sold or gave away.		m.	Water container emptied and refilled with fresh water at least weekly?			498	
p. Other? (specify:)		n.	Frequent removal of weeds and manure from premises?			49	
p. Other? (specify:)		0.	Screened-in stalls?			500	
were used on this operation during the previous 12 months? Yes = 1 No = 3 Code a. Routine garbage pickup.		p.				501	
were used on this operation during the previous 12 months? Yes = 1 No = 3 Code a. Routine garbage pickup.	61	Wh	ich of the following disposal methods for manure (including composted manur	e) and/or v	waste hedd	ina	
a. Routine garbage pickup	•			o, ana, o		9	
b. Hauled to landfill (not routine garbage pickup). c. Hauled away, other than to a landfill. d. Applied on fields on the operation where any livestock (including equine) graze. e. Applied on field on the operation where no livestock graze. f. Manure/waste bedding allowed to accumulate or left to nature. g. Sold or gave away. 503 504 504 505 506 507				Yes = 1	No = 3		Code
c. Hauled away, other than to a landfill.		a.	Routine garbage pickup			502	
d. Applied on fields on the operation where any livestock (including equine) graze		b.	Hauled to landfill (not routine garbage pickup).			503	
graze		C.	Hauled away, other than to a landfill			504	
e. Applied on field on the operation where no livestock graze 506 f. Manure/waste bedding allowed to accumulate or left to nature 507 g. Sold or gave away 508		d.	• • • • • • • • • • • • • • • • • • • •	П	П	505	
f. Manure/waste bedding allowed to accumulate or left to nature		۵		_			
g. Sold or gave away		_					
		C	•				
		y. h.	Other (specify:).			509	

Section G. Office Use

62. Enter interview response codes – please select the appropriate box.

			Code	
a	ā.	Out of business.	1	
t).	Refusal	2	
c) .	Complete	3	
c	d.	Partial refusal	4 >	510
E	€.	Inaccessible	5	
f		Out of scope.	6	
ç	J.	No resident equine on July 1	7 J	
		umerator Note: If item 62 = 2 or 4 then check the box below that best explain refusal.		
			Code	
	₹.	Does not want to commit time.	1	
t).	Does not have necessary records available	2	511
C).	Has participated in too many surveys.	3	
C	d.	A bad time of year (planting, harvesting, second job, etc.).	4	
E	€.	Believes that this survey hurts the operator more than helps	5	
f	•	No reason given, or other miscellaneous reasons	6	
64. [Did	the respondent use operation records to report their management practices		
			Code	
a	₹.	All of the time?	1	
t).	Most of the time?	2	512
C) .	Some of the time?	<u> </u>	512
C	d.	Almost never?	4	
E	€.	Never?	5 J	
65. E	Ξnι	umerator number		513
END	IN	G TIME [MILITARY]		313